Attachment 4

PERMIT REQUIRED CONFINED SPACE ENTRY PERMIT

The Entry Supervisor is required to fill in specific information in the attached form, brief all participants involved in the Permit Required Confined Space entry, provide a copy of this form for the site and send the closed entry permit to Safety Office to keep on file for at least one year's reference.

GENERAL SERVICES DIVISION

CONFINED SPACE ENTRY PERMIT

THIS PERMIT IS TO BE KEPT AT THE JOB SITE UNTIL THE JOB IS COMPLETED

COPY to Entry Supervisor
COPY at Job Site (To be Returned to Safety Office Following Job Completion)

DURATION: This permit	is valid only for the fo	ollowing time frame	e:
ISSUE DATE:	TIME:		
EXPIRES ON - DATE:			
SITE LOCATION:			
PURPOSE OF ENTRY:	(Building Name/N	Jumber, Street Address, Roo	m Number, etc.)
	(Equipment to be	Worked On and Type of Wo	rk)
1. INITIAL ATMOSPHE CO ppm 0 ₂ % Acceptable Levels for 19.5% < 0 ₂ < 23.5% LFL < 10 %	H_2S pp LFL % or Entry: $CO < 50 \ ppm$		
Tester's Signature _		Date/Tin	ne
2. HAZARD ISOLATIO following measures are HAZARD		e/control hazards in	
3. VENTILATION : Mechanical Natural	Yes Yes	Purge Time	

1	II 1125	ppm	Instrument Used - B	
0 ₂ %	LFL _	%	Other _	
Tester's Sign	ature		Date/Time	
. COMMUNICAT	TION PROCEI	OURES:		
VOICE	Ξ٦	TWO-WAY	RADIO	
				-
RESCUE PROC	EDURES:			
Two-W	ay Radio to EM	FS Compute	er Control Room Chec	ked
Telepho	one Available to	Call Rescue	e Services and Checked	d
-	ed at		PHONE:	
	(Within 2	5 feet of PRCS)		
	e Service Coordi		~	
			PHONE: _	
	ess:			
Use No	n-Entry Rescue	Retrievai		
. TRAINING:			TRAINED ON	
		PRCS	AHA	
TTENDANT:	(Name)	(D	AHA _	(Date; EVERY 2 Year
ATTENDANT:	(Name)	(D	AHA	(Date; EVERY 2 Year
ATTENDANT:	(Name)	(D	AHA _	(Date; EVERY 2 Year
ATTENDANT:ATTENDANT:ATTENDANT:AUTHORIZED	(Name)	PRCS _	AHA _ Date; within Last Year) AHA _	(Date; EVERY 2 Years
TTENDANT: TTENDANT:	(Name)	PRCS _	AHA _ Date; within Last Year) AHA _ AHA _	(Date; EVERY 2 Year
TTENDANT: TTENDANT:	(Name)	PRCS PRCS _	AHA _ Date; within Last Year) AHA _ AHA _ AHA _ AHA _	(Date; EVERY 2 Year (Date; every 2 Years)
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ATTENDANT: ATTENDANT: AUTHORIZED ENTRANTS:	(Name)	PRCS _	AHA _ Date; within Last Year) AHA _ AHA _ Date; within Last Year) AHA _	(Date; EVERY 2 Years)
ATTENDANT: ATTENDANT: AUTHORIZED ENTRANTS: ERESCUE:	(Name)	PRCS PRCS PRCS PRCS PRCS PRCS PRCS PRCS	AHA _ Date; within Last Year)	(Date; EVERY 2 Year (Date; every 2 Years)
ATTENDANT: ATTENDANT: AUTHORIZED ENTRANTS: ERESCUE:	(Name)	PRCS PRCS PRCS PRCS PRCS PRCS PRCS PRCS	AHA _ Date; within Last Year) AHA _ AHA _ Date; within Last Year) AHA _	(Date; EVERY 2 Year (Date; every 2 Years)
TTENDANT: TTENDANT: TTENDANT: UTHORIZED NTRANTS: EESCUE:	(Name)	PRCS _	AHA _	(Date; EVERY 2 Years)
ATTENDANT: ATTENDANT: AUTHORIZED ANTRANTS: ERESCUE:	(Name) (Name) RDS: The following the follo	PRCS _	AHA _ Date; within Last Year)	(Date; EVERY 2 Years)

9. EQUIPMENT : Enter "N/A" for items that do not apply.	<u>COMPLETE</u>
Direct Reading Gas Monitor - Tested	
Fall Arrest/Restraint, Each Entrant - Inspected	
Full Body Harness w/ Back D-Ring	
Lifeline & Connectors	
Rescue Retrieval System - Inspected	
Tripod Personnel and/or Equipment Winch (Raise, Lower, Brake)	ra Lina)
Communications - Fresh Batteries & Tested	c, Line)
For Summoning Rescue	
For Talking Between Entrants & Attendant	
PPE - Inspected	
Hard Hat	
Hearing Protection (Plugs or Muffs)	
Eye Protection	
Safety Glasses Face Shield	
Chemical Goggles Welders	
Respirator	
1/2 Face Full Face	
SCBA Other, Type:	
Type Cartridge	
Last Trained on	
Fit Tested	
Outer Garment	
Apron Coveralls Other:	
Gloves, Type:	
Footwear, Type:	
Portable Lighting & Electrical Equipment	
Required to be NEC Class 1, Div 1 Yes	es No
OTHER:	
I VERIFY THAT ALL OF THE ABOVE PRE-ENTRY PREPARATIONS	
THE ENTRANT(S) AND ATTENDANT(S) HAVE BEEN BRIEFED AN	-
AND THAT THE SPECIFIED CONFINED SPACE IS SAFE TO ENTER	ł.
ENITON CLIDEDVICOD.	IONE.
ENTRY SUPERVISOR: PI	HONE:
ALTERNATE	
ENTRY SUPERVISOR: PI	HONE:
(Name)	
Entry Supervisor's SIGNATURE	DATE:

CONFINED SPACE ENTRY PERIODIC ATMOSPHERIC TESTING

Continuous monitoring results should be recorded by the entrant every 2 hours. Peak Readings will be annotated when the work is completed.

Location Instrument UsedBW GasAlertMax	Other
DATE:	READINGS

TIME	CO ppm	H ₂ S ppm	02 %	LFL %
PEAK				
READING				

ENTRANT(S):